BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number In/C/0225

| Effective December 8, 2004 | | | | | | | / | 10/568335 | | | |
|--|--------------|---|-------------------------------------|---|--|---------------------|------------------------|-------------|------------------------|-----------------|--|
| | | CLAIM | | ED - PART | (Column 2) | SMALL I | ENTITY | · (| | ER THA | |
| U.S. NATIONAL STAGE FEES | | | | | (00:0:11:12) | RATE | | | - | L ENTIT | |
| BASIC FEE | | SMALL | . ENT. = \$ 150 | LARGE ENT. = \$ 300 | BASIC FEE | FEE | - | RATE | | | |
| EXAMINATION FEE | | Satisfies F | CT Article 33(1)- \$ 50 / \$ 100 | All other situations = | EXAM. FEE | | -J° | R BASIC FEE | 30 | | |
| SEARCH FEE | | | U.S. is ISA ALL other | A = \$ 50 / \$ 100 er countries = 00 / \$ 400 | \$ 100 / \$ 200 All other situations = \$ 250 / \$ 500 | SEARCH FE | E | | EXAM. FEE SEARCH FE | 20 | |
| EE FOR EXTRA SPEC. PGS. | | | - : | minus 100 = | / 50 = | X \$ 125 | | - | ļ | 180 | |
| OTAL CHARGEABLE CLAIMS | | | 17 | minus 20 = , | | X \$ 25 = | - | 4 | X \$ 250 | = | |
| IDEPENDENT CLAIMS | | | 3 | minus 3 = | | | | | X \$ 50 = | | |
| IL | TIPLE DEPE | NDENT CLAIM P | | | | X \$ 100 = | - | OI | 11.4200 | | |
| If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | + \$ 180 = | | OF OF | | · · | |
| 1 | | CLAIMS AS | AMENDI | (Columr | 1 2) (Column 3) | SMALL | ENTITY | OR | OTHEF SMALL | | |
| ž ŀ | · | CLAIMS REMAINING AFTER AMENDMENT | | HIGHES NUMBE PREVIOU PAID FO | R PRESENT SLY EXTRA | RATE | ADDI- TIONAL FEE |] | RATE | ADD. TION | |
| | Total | * | Minus | ** | = | X \$ 25 = | | OR | X \$ 50 = | - | |
| | Independent | | Minus | *** | = | X \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRES | SENTATION OF M | MULTIPLE DE | PENDENT CL | AIM . | + \$ 180 = | | OR | + \$ 360 = | | |
| | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | | |
| _ | | (Column 1) CLAIMS | | (Column | | | | | | | |
| 15 | | REMAINING AFTER AMENDMENT | | NUMBER PREVIOUSI PAID FOR | PRESENT LY EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL | |
| | otal | * | Minus | ** | = | X \$ 25 = | | OR | X \$ 50 = | FEE | |
| | dependent | | Minus | *** | = ' | X \$ 100 = | | OR | X \$ 200 = | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | + \$ 180 = | | OR | | | | |
| - | TO | | | | | | | L | + \$ 360 = | · | |

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.